

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LH		2-20-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	jm	70860	5/30/01
RESPONSE FORMALITY REVIEW	AH	917	11-15-01

INDEX OF CLAIMS

BEST AVAILABLE C

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	2/20/01
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Claim	Date
Final	
Original	
51	2/20/01
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99	2/20/01
100	2/20/01

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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8/2/01
 8/5/01
 8/15/01